6535/53651

Levin

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DECLARATION FOR UTILITY OR

Attorney Docket Number

First Named Inventor

PATENT APPLICATION (37 CFR 1.63) Declaration Submitted with Initial Filling (surcharge (37 CFR 1.16 (e)) required) As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Adhesive Bandage Indicating Wound Care Instructions (Title of the Invention) the specification of which is attached hereto	1	DEGICAL			First Named inventor Levin						
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My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Adhesive Bandage Indicating Wound Care Instructions Adhesive Bandage Indicating Wound Care Instructions (Title of the Invention) the specification of which is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 36 U. SC. 119(a)-(d) or (f), or 365(b) of any foreign application for patent, inventor's or plant breeder's rights certificate(s), or 385(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below by checking the box, any foreign application for happlication on which priority is claimed. Prior Foreign Application Foreign Filing Date Priority Certified Copy Attached?		with Initial OR Filing	with Initial OR Filing (surcharge Filing (37 CFR 1.16 (e))		Examine	r Name					
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DECLARATION – Utility or Design Patent Application

Direct all correspondence to: X Customer Number or Bar Code Label 30505 OR Correspondence address below										
Name Mark James Spolyar										
Address 554 Jersey Street										
City San Francisco		State CA	ZIP 94114							
Country USA	Telephone 4	15-826-7966	Fax 415-480-1780							
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such statements may jeopardize the validity of the application or any patent issued thereon.										
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor										
Given Name [(first and middle [if any]) Kenneth Martin Family Name or Surname Levin										
Inventor's Signature Kenell Martin Lew Date 12/3/01										
Residence: City Nove-fo Sta	,	_	Citizanshin Linkad State	es						
Mailing Address S Santa Yorna C+ Bostone Bushole Supple										
city Novato sta	te CA	ZIP 94945	Gountry USA							
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any]) Family Name or Surname										
Inventor's Signature	**************************************		Date							
Residence: City Stat	le	Country	Citizenship							
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City Stat	9	ZIP	Country	ᅦ						
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.										